

MOTION BY SUPERVISORS YVONNE BURKE & GLORIA MOLINA May 10, 2006

The Department of Mental Health has had difficulty in avoiding reliance on one-time funding. Next year will be no different, and DMH will continue to experience budget fluctuations regardless of the infusion of the Mental Health Services dollars- unless the root causes of the problems are addressed. In keeping with Supervisor Molina's April 18<sup>th</sup> Motion, we must develop strategies to address the structural deficiencies- in particular, focus on the State and Federal mandated programs of Healthy Families and EPSDT.

Healthy Families (HF) Health Plan provides low cost insurance to children zero to nineteen who do not qualify for Medi-Cal. Under the plan, DMH provides mental health services for Severely Emotionally Disturbed children through its existing network of Short-Doyle/Medi-Cal directly operated and contracted providers. EPSDT is a mandated component of the California Medi-Cal program that provides physical and mental health services to full-scope Medi-Cal beneficiaries under age 21 that include therapy; crisis counseling; case management; special day programs; medication; alcohol and drug treatment and Therapeutic Behavioral Services (TBS) to children and

MOTION

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youth with severe emotional problems.

Local demands require Los Angeles County to further expand utilization of Healthy Families and EPSDT programs (e.g., court injunctions related to the Katie A. lawsuit, Specialized Foster Care Mental Health Initiative). A required county match of 35% and 5% share respectively for the programs' growth with a projected growth of approximately \$1.6 million and \$1.5 million match dollars that will serve an additional 1200 children for Healthy Families and another 5,000 children and young adults under age 21 under EPSDT. The department does not have unallocated dollars in FY 2006-07 and future years to use as match for further growth.

WE, THEREFORE, MOVE that the Board instruct the CAO to work in conjunction with the Department of Mental Health to develop strategies and report back prior to budget deliberations on recommendations to directly address the chronic structural deficit inherent to the Department of Mental Health; in particular examine avenues to manage EPSDT and Healthy Families match and growth.